

“KNOWLEDGE REGARDING FOOD SAFETY AMONG SCHOOL- GOING CHILDREN AT SELECTED SCHOOLS OF KURALI (PUNJAB)”

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ABSTRACT

Food safety is scientific discipline which describes handling, preparation and storage of food in a way that prevent food borne illness. Contaminated food can transmit the diseases from person to person as well serve as the growth medium for micro-organisms that can cause food poisoning. The study's objective was to evaluate how well school-age children understood food safety after receiving a health education package. The study method employed was quasi-experimental. The current investigation employed a non-equivalent pre-test post-comparison group design. Total 300 participants were selected using simple random sampling 150 for experimental group and 150 for control group. Structure knowledge questionnaire was used to assess the effectiveness of health education package on knowledge regarding food safety. The study found that the experimental group had a mean± SD knowledge score of 8.94±3.71 and 18.37±4.62 for pre-test and post-test food safety, while the control group had a mean± SD of 9.10± 3.80 and 9.65± 4.17. Using a t-test, the experimental group showed significant differences in food safety knowledge scores ($p<0.05$) compared to the control group ($p>0.05$). Comparing the experimental group to the control group, the study found that the former had higher food safety knowledge scores.

Keywords: - Food safety, food safety knowledge, school children.

INTRODUCTION

The scientific field of food safety describes how to handle, prepare, and store food in a way that minimizes the risk of contracting a food-borne illness. This covers several practices that ought to be adhered to in order to prevent potentially serious health risks. In this sense, there is frequently overlap between food safety and food defense to shield consumers from harm. Food that has been contaminated can spread illnesses from person to person and act as a breeding ground for microorganisms that can produce food poisoning.

Children are the most vulnerable population group to foodborne diseases due to their increased susceptibility to illness when exposed to foodborne agents. The primary cause of this issue is from inadequate safety measures in school canteens. Hence, it is imperative to have an accurate and dependable tool that can evaluate the level of food safety among food handlers in the school canteen, specifically in terms of their understanding and implementation of personal hygiene, food hygiene, food storage, and environmental cleanliness.

Young children have a lower body weight, a less developed immune system, and less control over the preparation of their meals, which puts them at a greater risk of contracting a foodborne disease than adults have during the same age. Especially in young children, those who contract foodborne illnesses are at a greater risk of experiencing long-term health repercussions and even death. Approximately one half of reported foodborne illness occurs in children. Children are disproportionately affected by these foodborne microorganisms; *Campylobacter*, *Escherichia coli*, *Salmonella*, and *Shigella*.

The study's objectives

1. To evaluate school-age children's pre- and post-test knowledge of food safety.
2. To create and implement a health teaching package for children in school that focuses on food safety.
3. To evaluate the impact of a health education program on food safety for students enrolled in school.

4. To ascertain the association between pre-test food safety knowledge and selected demographic characteristics.

HYPOTHESIS

- With regard to food safety, the post-test knowledge score of school-aged children will be considerably greater than their pretest knowledge score.
- Pre-test knowledge scores will be significantly associated with certain demographic characteristics.

MATERIAL AND METHODS

For this study, a quantitative research approach was utilised, and a quasi-experimental design, also known as a non-equivalent pre-test post-comparative group plan, was utilised. The children who were attending school were the target audience, and the group that was accessible was comprised of children who were attending school (10–15 years old) from a selection of schools in Kurali (Punjab). Both the experimental group and the control group consisted of 150 school-going children from chosen schools in Kurali. The experimental group consisted of 150 children, while the control group consisted of exactly the same number of school-going children. In order to choose the samples, a straightforward random sampling method was utilised.

TOOL: The tool consisted of two sections:

Section A: *Socio-Demographic Variables* - Socio-demographic data includes age, gender, class, religion, type of family, number of children in family, residence, dietary pattern and food habits data includes source of drinking water, did you filter the water before drinking, source of information, type of home, did you wash the vegetables and utensils before cooking, education of mother, education of father, occupation of father, occupation of mother, family income per month and source of information.

Section B: *Structured Knowledge Questionnaire* - A structural knowledge questionnaire was included. This instrument comprised of 30 questions designed to measure school-age children's understanding of food safety. Each item has one correct answer out of four

alternatives, and each correct response is worth one mark. The following aspects were addressed in the questions:

- ✓ Hygiene.
- ✓ Food hygiene.
- ✓ Food safety and its principles.
- ✓ Importance of food safety and basics for handling food safely.
- ✓ Foodborne diseases.
- ✓ Causes and clinical manifestation of food borne disease.
- ✓ Treatment of foodborne diseases.
- ✓ Preventions of food borne disease.

RESULTS AND INTERVENTION

The acquired data were initially coded and summarised in a master data sheet before being analysed using SPSS, version 21, in accordance with the study's objectives.

TABLE 1 Frequency and Percentage Distribution of Subjects as Per Their Demographic Variables (Child Profile)

N=300

Demographic variables		Experimental group N=150		Control group N=150	
		N	%	N	%
Age in years	10	17	11.3	37	24.7
	11	21	14.0	32	21.3
	12	31	20.7	30	20.0
	13	27	18.0	21	14.0
	14	29	19.3	16	10.7
	15	25	16.7	14	9.3
Gender	Male	76	50.7	80	53.3
	Female	74	49.3	70	46.6
Class	5 th	27	18.0	66	44.0
	6 th	24	16.0	18	12.0
	7 th	42	28.0	34	22.7
	8 th	24	16.0	20	13.3
	9 th	33	22.0	12	8.0

Religion	Hindu	73	48.7	80	53.3
	Muslim	04	2.7	05	3.3
	Sikh	71	47.3	61	40.7
	Christian	02	1.3	04	2.7
Type of Family	Nuclear	05	36.0	64	42.7
	Joint	93	62.0	81	54.0
	Extended	03	2.0	05	3.3
Number of children in family	One	20	13.3	25	16.7
	Two	46	30.7	38	25.3
	Three	54	36.0	47	31.3
	More than three	30	20.0	40	26.7
Residence	Rural	64	42.7	67	44.7
	Urban	86	57.3	83	53.3

TABLE-1 (b) - Frequency and Percentage Distribution of Subjects as Per Their Food Habits

N=300

Demographic variables		Experimental group N=150		Control group N=150	
		N	%	N	%
Dietary pattern	Vegetarian	115	076.7	108	072.0
	Non- vegetarian	035	023.3	042	028.0
Source of drinking water	Open well	005	003.3	007	004.7
	Bore well	023	015.3	018	012.0
	Hand pump	013	008.7	019	012.7
	Tap water	109	072.7	106	070.7
Did You Filter the Water before drinking	Yes	099	066.0	102	068.0
	No	051	034.0	048	032.0
Source of Information	Mass media	087	058.0	085	056.7
	Peer group	031	020.7	035	023.3
	Printed-media	032	021.3	030	020.0

Type of Home	Kachaa	014	009.3	000	000.0
	Pakka	136	090.7	150	100.0
Did you wash the vegetables and utensils before cooking	Yes	150	100.0%	150	100.0%
	No	000	000.0%	000	000.0%

TABLE-2 - Comparison of Pre-Test and Post-Test Knowledge Scores Regarding Food Safety of The Subjects

N=300				
Group	Test	Mean \pm SD	Mean difference	t-test
Experimental	Pre-test	8.94 \pm 3.71	9.43	17.14**
	Post-test	18.37 \pm 4.62		
Control	Pre-test	9.10 \pm 3.80	0.55	00.36
	Post-test	9.65 \pm 4.17		

*(p<0.05)

TABLE – 3: Associations Between Demographic Variables and Pre-Test Level Of Knowledge of the Subjects

N=300

Demographic variables	Category	Subjects Knowledge						χ^2
		Poor		Average		Good		
		n	%	N	%	n	%	
Age	5	035	64.8	19	35.2	0	0.0	2.845
	6	038	71.7	15	28.3	0	0.0	
	7	043	70.5	18	29.5	0	0.0	
	8	031	64.6	17	35.4	0	0.0	
	9	035	77.8	10	22.2	0	0.0	
	10	026	66.7	13	33.3	0	0.0	

Gender	Male	101	67.3	49	32.7	0	0.0	.564
	Female	107	71.3	43	28.7	0	0.0	
Class	5 th	062	66.7	31	33.3	0	0.0	2.496
	6 th	033	78.6	09	21.4	0	0.0	
	7 th	054	71.1	22	28.9	0	0.0	
	8 th	029	65.9	15	34.1	0	0.0	
	9 th	030	66.7	15	33.3	0	0.0	
Religion	Hindu	110	71.9	43	28.1	0	0.0	1.522
	Muslim	005	55.6	04	44.4	0	0.0	
	Sikh	089	67.4	43	32.6	0	0.0	
	Christian	004	66.7	02	33.3	0	0.0	
Type of Family	Nuclear	078	66.1	40	33.9	0	0.0	
	Joint	126	72.4	48	27.6	0	0.0	
	Extended	004	50.0	04	50.0	0	0.0	

Number of children in family	One	033	73.3	12	26.7	0	0.0	4.990
	Two	061	72.6	23	27.4	0	0.0	
	Three	073	72.3	28	27.7	0	0.0	
	More than three	041	58.6	29	41.4	0	0.0	
Residence	Rural	084	64.1	47	35.9	0	0.0	2.970
	Urban	124	73.4	45	26.6	0	0.0	
Dietary Pattern	Vegetarian	160	71.7	63	28.3	0	0.0	2.384
	Non vegetarian	048	62.3	29	37.7	0	0.0	
Source of Drinking Water	Open-Well	007	58.3	05	41.7	0	0.0	6.089
	Bore- Well	027	65.9	14	34.1	0	0.0	
	Hand- Pump	028	87.5	04	12.5	0	0.0	
	Tap- Water	146	67.9	69	32.1	0	0.0	
Did You Filter the Water before drinking	Yes	137	68.2	64	31.8	0	0.0	.136
	No	071	71.7	28	28.3	0	0.0	

Source of Information	Mass media	122	70.9	50	29.1	0	0.0	.330
	Peer group	044	66.7	22	33.3	0	0.0	
	Printed media	042	67.7	20	32.3	0	0.0	
Type of Home	Kuchaa	011	78.6	03	21.4	0	0.0	14.68**
	Pukka	197	68.9	89	31.1	0	0.0	
Did you wash vegetables and utensils before cooking	Yes	208	69.3	92	30.7	0	0.0	
	No	000	00.0	00	00.0	0	0.0	

(P>0.05)

DISCUSSION:

The study's results showed that there was a difference between the experimental group (8.94±3.71) and the control group (9.10±3.80) in the mean score of the pre-test knowledge score about food safety among school-going children. After the pre-test, the experimental group was given a health information package. After getting a health education package, there was a big difference between the experimental group's mean post-test score (18.37±4.62) and the control group's mean score (9.65±4.17) on a test of how much they knew about food safety. The experimental group does better on the post-test than the control group when it comes to how much they know about food safety among school-aged kids. The test showed a difference in mean knowledge scores that was statistically significant ($p < 0.05$).

A similar study conducted by Shen Metal (2015) conducted a quasi-experimental study to assess knowledge, attitude and behaviour on nutrition and food safety health education for primary school students in two poverty stricken countries. The study aimed to assess the knowledge, attitude and behaviour with respect to nutrition and food safety. Twelve primary schools are randomly selected and then six geographically dispersed schools were assigned to the intervention group in a non-random way. A questionnaire was introduced to participants. Student's participants in intervention group received targeted

nutrition and food safety lecture 0.5 hour per week for two semesters. Item response theory was applied for assessment of questionnaire. A study concluded that health education improved 95% in term of knowledge and behavior but had no effects on attitude.

Conclusion

The investigation found a substantial difference between the experimental group's and the control group's knowledge. The experimental group exhibits a significantly higher level of expertise in food safety compared to the control group. There was no notable correlation between the pre-test knowledge score and the demographic characteristics they selected.

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